Please type a plus sign (+) inside this box → [+]

PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R.§ 1.53(b))

Attorney Docket No.	1-485
First Inventor or Application Identifier	YAMADA t al.
Title	SEMICONDUCTOR INTEGRATED CIRCUIT
Express Mail Label No.	

APPLICATION ELEMENTS
See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, VA 22313-1450

1. [X] * Fee Transmittal Form (e.g., PTO/SB/17) *(Submit an original and a duplicate for fee processing)*
2. [X] Specification [*Total Pages* 18]
   - -Descriptive title of the Invention
   - -Cross Reference to Related Applications
   - -Background of the Invention
   - -Summary of the Invention
   - -Brief Description of the Drawings
   - -Detailed Description of the Preferred Embodiment
   - -Claims
   - -Abstract of the Disclosure
3. [X] Drawing(s) *(35 U.S.C. 113)* [*Total Sheets* 4]
4. Oath or Declaration [*Total Sheets* 3]
   - a. [X] Newly executed (original or copy)
   - b. [ ] Copy from a prior application (37 C.F.R. .§ 1.63 (d)) *(for continuation/divisional with Box 16 completed*
     - i. [ ] DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

**NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)*

5. [ ] Microfiche Computer Program *(Appendix)*
6. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   - a. [ ] Computer Readable Copy
   - b. [ ] Paper Copy (identical to computer copy)
   - c. [ ] Statement verifying identity of above copies

U.S. PTO 10/680117 16834

100803

ACCOMPANYING APPLICATION PARTS

7. [X] Assignment Papers (cover sheet & document(s))
8. [ ] 37 C.F.R.§ 3.73(b) Statement *(when there is an assignee)* [ ] Power of Attorney
9. [ ] English Translation Document *(if applicable)*
10. [X] Information Disclosure Statement (IDS)/PTO-1449 [X] Copies of IDS Citations
11. [ ] Preliminary Amendment
12. [X] Return Receipt Postcard (MPEP 503) *(should be specifically itemized)*
13. [ ] *Small Entity Statement(s) *(PTO/SB/09-12)* [ ] Statement filed in prior application, Status still proper and desired
14. [X] Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
15. [ ] Other: .....

16. **If a CONTINUING APPLICATION**, *check appropriate box, and supply the requisite information below and in a preliminary amendment*:
    [ ] Continuation [ ] Divisional [ ] Continuation-in-part (CIP) of prior application No:_____
    *Prior application information: Examiner*_____ *Group/Art Unit:*_____
    For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

[X] *Customer Number or Bar Code Label* **23400** *(Insert Customer No. or Attach bar code label here)* *or* [ ] *Correspondence address below*

Name					
Address					
City		*State*		*Zip Code*	
Country		*Telephone*	(703) 707-9110	*Fax*	(703) 707-9112

Name (Print/type)	DAVID G. POSZ	*Registration No. (Attorney/Agent)*	37,701
Signature		*Date*	October 8, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Arlington, VA 22202. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Alexandria, VA 22313-1450.

PTO/SB/17 (01-03)
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT ($) 810

Complete if Known	
Application Number	
Filing Date	October 8, 2003
First Named Inventor	YAMADA et al.
Examiner Name	
Art Unit	
Attorney Docket No.	1-485

METHOD OF PAYMENT *(check all that apply)*

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

Deposit Account Number: 50-1147

Deposit Account Name: POSZ & BETHARDS, PLC

The Commissioner is authorized to: *(check all that apply)*

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) ($) 770

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

			Extra Claims		Fee from below		Fee Paid
Total Claims	12	-20**=	0	X	18	=	0
Independent Claims	2	-3**=	0	X	86	=	0
Multiple Dependent						=	

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Indepe ndent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) ($) 0

** or number previously paid, if greater; For Reissues, see above*

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for *ex parte* reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

SUBTOTAL (3) ($) 40

*Reduced by Basic Filing Fee Paid

SUBMITTED BY				Complete *(if applicable)*	
Name (Print/Type)	DAVID G. POSZ	*Registration No. (Attorney/Agent)*	37,701	*Telephone*	(703) 707-9110
Signature				*Date*	October 8, 2003

WARNING: Informati n on this form may become public. Credit card information should not be included n this form. Provide credit card information and authorization n PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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